Discl	osure	Report	Cover
		TTOPOLE	COICE

NOV 23 2015

Amendment	
☐ Yes	☐ No

Use this form for general report and committee information, must be signed and submitted along with other detailed forms. Do not use this form to update information.

1. Committee Information			学 科·大学学	0.000		
a. Full Name					c. ID Number	
Paricia		ringer			The state of the s	
b. Mailing Address (include City,	State and Zip Code)	4.5			d. Date Filed	
1491 Men	nial 1d	wy				
hake hun	و, مد	28746			e. Phone Number	
2. Report Year 3. Period St.	art Date (mm/dd/	y) 4. Period En	d Date (mm/dd/vv)	5. Treasu	urer Full Name	
	14-15				icia Maringer	
6. Type of Committee (Chec	k One)				eport from one category)	
	Party	Municipal	State/County		Referendum	
PAC	Referendum	Organizational	☐ Organiza	tional	☐ Organizational	
Independent Expenditure	■ f	Thirty-five day	Quarterly	/	Pre-referendum	
Legal Expense Fund		Pre-primary	Firs		Final	
7 Toma of Family 200		Pre-election	Sec		Supplemental Final	
7. Type of Fund (if applicated) Booster Fund	ble, check one)	Pre-runoff	Thi		Annual	
Building Fund	1	Semi-annual	Fou		☐ Special	
Bunding Fund		Mid Year	Semi-ani			
Other:		Year End		l Year	10. Special Report Name	
8. Number of Fundraisers th	nic Donout	Final Special		r End		
o. Humber of Fundraisers in	ns Report	Special	Final Special			
11. Account Information						
a. Financial Institution Full Name	0.000	A Committee of the comm	1. Account Infor			
Carolina Tru	15 +	a.	Financial Institution	Full Name		
b. Purpose	c. Account Cod	• 345	. Purpose			
2	er recount cou	5	ruipose		c. Account Code	
Campaign	d. Period Begin	Balance			d. Period Begin Balance	
	\$ 4					
CEDTIFICATION	, -0				\$	
CERTIFICATION			(水)精制			
I certify that the Committee or	Fund is in complia	nce with all applica	able provisions of A	rticle 22A, 2	22B & 22D-22M of Chapter 163	
of the NC General Statutes and	that no funds are o	commingled with p	rohibited or other no	on-disclosed	I funds. I further certify that this	
report is complete, true and cor	rect and that I have	been trained by the	e NC State Board o	f Elections.		
Datain M	ARINGER	2.	-P)-		-	
Printed Name of S		alle	- Mar	\leftarrow	11-23-15	
FOR OFFICE USE ONLY	oigner 🔾	Signa	ture of Appointed Trea	surer	Date	
FOR OFFICE USE ONLY		生 計畫董事	~			
Date Received:	11/23/13) Employee	e: 1/2	- <u>D</u>	Delivery Method	
					Normal Mail	
Date Postmarked:		Employee	e:		Registered Mail	
			国家企業 條		Hand Delivered	
Date Scanned:		Employee	e: <u> </u>		Electronically Filed	
Date Data Entered:		Permission			☐ Signer has not received	
		Employee		_	mandatory training	
Please Note: This form	cannot be used to	amend committ	ee information suc	ch as the co	ommittee address, treasurer,	
assist	ant treasurer, cus	todian of books in	nformation, or acc	ount inform	nation.	
You must amer	nd the Statement	of Organization (CRO-2100A-E) to	make con	nmittee changes	
CRO-1000		S. John Chi	- 15 = 15511 E) K	con	minute changes.	

Detailed Summary Use this form to summarize all disclosure reporting forms and to total monetary information

Amendment

Yes No

1. Committee Full Name (and Fund if applicable)		2. Type of Report		3. ID Number	
Start of Election Cycle: January 1,		Į,	Total this Reporting Period	Total this Election Cycle	
4) Cash on Hand at Start		\$	7	\$	
RECEIPTS					
5) Aggregated Contributions from Individuals	(CRO-1205)	\$	1881,27	\$	
6) Contributions from Individuals	(CRO-1210)	\$		\$	
7) Contributions from Political Party Committees	(CRO-1220)	\$		\$	
8) Contributions from Other Political Committees	(CRO-1230)	\$		\$	
9) Loan Proceeds	(CRO-1410)	\$		\$	
10) Refunds/Reimbursements to the Committee	(CRO-1240)	\$		\$	
11) Other Receipt Sources	1.				
11a) Interest on Bank Accounts	(CRO-1250)	\$		\$	
11b) Contributions from Not-For-Profit Organization	ons (CRO-1250)	\$		\$	
11c) Outside Sources of Income	(CRO-1250)	\$		\$	
11d) Legal Expense Fund - Other Sources	(CRO-1270)	\$		\$	
11e) Exempt Purchase Price Sales	(CRO-1265)	\$		\$	
12) TOTAL RECEIPTS (Add lines 5, 6, 7, 8, 9,10,11a,11b,	,11c,11d and 11e)			\$	
<u>EXPENDITURES</u>					
13) Disbursements	Messesses				
13a) Operating Expenditures	(CRO-1310)	\$	1225.00	\$	
13b) Contributions to Candidates/Political Committ	tees (CRO-1310)	\$		\$	
13c) Coordinated Party Expenditures	(CRO-1310)	\$		\$	
14) Aggregated Non-Media Expenditures	(CRO-1315)	\$		\$	
15) Loan Repayments	(CRO-1420)	\$		\$	
16) Refunds/Reimbursements from the Committee	(CRO-1320)	\$		\$	
17) In-Kind Contributions	(CRO-1510)	\$	656.27	\$	
18) TOTAL EXPENDITURES (Add lines 13a, 13b, 13c, 1-		\$	0	\$	
19) Cash on Hand at End (Add lines 4 and 12 together, then		\$	8	\$	
ADDITIONAL INFORMATION			Note that the second		
20) Non-Monetary Gifts Given to Other Committees		\$	A CONTRACTOR AND		
21) Outstanding Loans (incl. ones from other campaign	ns) (CRO-1430)	\$			
22) Debts and Obligations owed by the Committee	(CRO-1610)	\$			
23) Debts and Obligations owed to the Committee	(CRO-1620)	\$			
24) Account Transfers Within the Committee	(CRO-1720)	\$		and the state of t	
25) Administrative Support	(CRO-1710)	\$		\$	
26) Forgiven Loans	(CRO-1440)	\$		\$	
27) 48-Hour Notice Reports Sum	(CRO-2220)	\$		\$	
28) Contributions to be Refunded	(CRO-1215)	\$		\$	

Cont	tributions f	rom Individua	ale			1	Amendment
		individual contribution		r contributions ur	of of oder \$50 if form CI	PO 12	Yes No
1. Con	amittee Full Nar	me (and Fund if app	olicable)	Old Today	der \$50 ir ioini C.		Number
				2			A TURBON TO THE PARTY OF THE PA
3. Con	tributor Inform	eation		Add R	emove		
a. Full N	Name, Mailing Addr	ress & Phone		b. Job Title/Prof		ld. Cor	mments
(includ	de city, state, & zip))	, john (a)			u. 00	Illiens
N	ANCY	mo NARY		Keye		1	
,	00/51	est de	ue Rd		ame/Specific Field	1	
(0 / -	MeNARY unset con ne, Nc 28	07111	School	Treacher	e. Elec	ction Sum to Date
		re, NC 00	176	-		\$	
		h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yy)	vv) k	c. Amount
		FireCourt					
П		 	Sig A	NS	7-20-13	+	\$ 201.14
			5:91	25	10-15-15	- [\$ 281.97 \$ 320.30
			,			- 1	\$
	tributor Informa			Add Re	emove		PARTITION TO STATE
	Name, Mailing Addre			b. Job Title/Prof		d. Cor	mments
(Шстис	de city, state, & zip)	<u> </u>	- The State of the	4			
				c. Employer's N	ame/Specific Field	-	
					illies president	ł	
						e. Elec	ction Sum to Date
						\$	P.S. A. Article (No. 1997)
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy	yy) k	. Amount
				10/Africanoscopic and an analysis of the second			\$
	410595						\$
							\$
	tributor Informa			Add Re	emove		
	ame, Mailing Addre			b. Job Title/Prof		d. Con	nments
(Includ	de city, state, & zip)	E_0	1 57				
				c. Employer's Na	ame/Specific Field	1	
					. I∮	e. Elec	ction Sum to Date
						\$	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	/y) k	. Amount
							\$
							\$
				et			\$
	al only this Pa			10000000000000000000000000000000000000	》與数學是	\$,	602.27
4.00 m (15.00 m) 3.00 (10.00 m)		RO-1210 Pages	CRO 1100)		1	\$ /	607.27 881.27

		rom Individua		Pg	of	Amendment Yes No
Use this	s form to report	individual contribution	ons over \$50 or c	ontributions und	er \$50 if form CI	RO 1205 is not used
1. Com	mittee Full Nan	ne (and Fund if app	licable)			2. ID Number
			į.			
	tributor Inform			Add Re	move	and the second second second
	ame, Mailing Addr		197	b. Job Title/Profe		d. Comments
<u> </u>	le city, state, & zip)					
404	مندحت ۷۱	nanger orial House, NC 28	507	c. Employer's Na	me/Specific Field	
140	11 men	orial peut	4	Doline	1.	
hal	he have	e, NC 28	3746	Kerne	-ef	e. Election Sum to Date
						\$ 54,00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy	
		cash	ا ان مو	(ae		5 \$ 5,00
		Cash	Star	nps		\$ 49.00
		ė.				\$
	ributor Inform		· 在联系统 🗆	Add Rer	move	
	ame, Mailing Addro le city, state, & zip)			b. Job Title/Profe	ssion	d. Comments
(= 1 = 1 / 1 = 1 = 1 = 1 = 1 = 1 = 1 = 1				Reli	ned	3
M	arion	13. Beaso	~	c. Employer's Nar		Variance
ч	222 4	J. DIXON	13109			
		Ne 28		1 Carlin	SS DWNET	e. Election Sum to Date
					SS DWNET	\$
	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	yy) k. Amount
		ce.			7-20-15	- \$ 5708.80
			_			\$
						\$
	ributor Informa			200 H 100 H	move	
	ame, Mailing Addre e city, state, & zip)			b. Job Title/Profes		d. Comments
			19.00	Key	ised	
THE C	mera	muty		c. Employer's Nan	ne/Specific Field	
15	·3 MI	en Ni				e. Election Sum to Date
h	ahe hur	Kaith, ien Ki ie, Ne 28	746			
		h. Form of Payment	i. In-Kind Descrip	ition	j. Date (mm/dd/yyy	\$ 10000
		2 (2	2 2	шол		
		C.C.			8-13-15	
]						\$
						\$
Contract of the Contract of th	al only this Pa					\$ 654,00
		RO-1210 Pages of Detailed Summary Pa	age CRO-1100)			\$ \$ 6

Amendment

Cont	ributions fr	rom Individua	ıls	Pg	of	Amendment Yes
Use this	s form to report in	individual contributio	ons over \$50 or o	contributions und	er \$50 if form CF	RO 1205 is not used
1. Com	mittee Full Nam	ne (and Fund if app	licable)	家人工學學發展		2. ID Number
						The state of the s
	tributor Informa		The second secon	Add Ren	move	+ADD
	ame, Mailing Addre de city, state, & zip)			b. Job Title/Profe	ssion	d. Comments
320				6 W.	Ner	
De	orge is	ke Inn	~	c. Employer's Nar	me/Specific Field	†
La	he ha	ke Inn		Lake	Lune	
		e NC 2		Lake	~ .	e. Election Sum to Date
	3 8					\$ 200.00
	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	
		ck.			8-11-15	- \$ 200.00
						\$
		¥				\$
	tributor Informa		· 经信息	Add Rei	move	
	ame, Mailing Addre			b. Job Title/Profe	ssion	d. Comments
	le city, state, & zip)	The state of the s		Redi	red	
cy	mthia	A. Altan way DR. e, NC 28	un	c. Employer's Nar	ne/Specific Field	•
17	11 Jains	way DR.			1011 - 177 8 / 2014	
	-lia Law	. NC 28	3746	affice	worker	e. Election Sum to Date
				71		\$ 200.00
	g. Account Code	h. Form of Payment	i. In-Kind Descrip	ption	j. Date (mm/dd/yyy	yy) k. Amount
		de			8-25-15	5 \$ 200.00
						\$
						\$
	tributor Informa			Add Rer	move	
	ame, Mailing Addre le city, state, & zip)			b. Job Title/Profes	ssion	d. Comments
			_	motorial	Speaker	
2	7 Bak	nms P:tt	5	c. Employer's Nan	ne/Specific Field	1
4	, O, 13 0X	10+		Self-	em n.	e. Election Sum to Date
ha	Ice hu	re, re à	28746	Sing	-,	
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descrip	otion	j. Date (mm/dd/yyy	\$ /00.00
		Ck.		,ucu	10-4-15	A
					10-7-13	
				_		\$
	Land die D					\$
Section 1997	al only this Pa	CONTRACTOR		(SA) (E) 改語		\$ 500.00
		RO-1210 Pages of Detailed Summary Page	age CRO-1100)		TRUE TO	\$ 500.00

		rom Individua		P	g of		Amendment Yes No
Use this	s form to report	individual contributions (and Francisco	ons over \$50 or o	contributions un			205 is not used
1. Com	minee run Nan	ne (and Fund if app	licable)		A STATE OF THE PARTY OF THE PAR	2. 1	D Number
3. Cont	tributor Inform	ation		Add R	emove	1077733	
a. Full N	ame, Mailing Addr	ess & Phone	* error	b. Job Title/Pro		la, c	omments
(includ	le city, state, & zip)		1 16 TH	51	1		
ゴレ	Jia is	pel Point le, de 28	\bigcirc \land		med Field		
20	cha.	od Point	Kd	c. employer 514	ame/Specific Field		
5 /	, , , , ,	10 00	0.11			e. El	lection Sum to Date
	le hu	e, De 28	746			\$	100.00
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	yy)	k. Amount
		Ck.			9-29-15	5	\$ 100.00
							\$
							\$
	ributor Inform				emove		
	ame, Mailing Addr le city, state, & zip)			b. Job Title/Pro	ession	d. C	omments
	(1991) - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 1991 - 199		to to the second	Ke	line		
-1	im te	mel.		c. Employer's N	ame/Specific Field	1	
						e. Election Sum to Date	
f. Prior	g. Account Code	L Farm of Daymont	h v 72 10	THE SECTION OF THE SE	**************************************	\$	25.00
	g. Account Cour	h. Form of Payment	i. In-Kind Descri	ption	j. Date (mm/dd/yyy	-	k. Amount
-		Cash			10-5-15	5	\$ 25.00
							\$
							\$
	ributor Inform		。 《四·特·森	A CONTRACTOR OF THE PARTY OF TH	emove		
	ame, Mailing Addro le city, state, & zip)			b. Job Title/Prof	ession	d. C	omments
(4	e city, suite, es mp,		75	1			
				c. Employer's Na	ame/Specific Field		
						o Fl	ection Sum to Date
							ection Sum to Date
f. Prior	g. Account Code	h. Form of Payment	i. In-Kind Descri	-tan	It Date (marginalism	\$	
П		and a sum of a my money	I. III-Mild Descrip	риоп	j. Date (mm/dd/yyy	(y)	k. Amount
							\$
					31		\$
							\$
	al only this P		The state of the s	The service		\$	125.00
A CONTRACTOR OF THE PARTY OF TH		RO-1210 Pages	CPO 3700			\$	1279.00

Disbursen	ients				Amendment
		from the committ	tee for operating ov	Pg of	ons to candidate/political
committees and	coordinated party ex	penditures	ee for operating ex	penses, contribution	ons to candidate/political
	Full Name (and Fun		新		2. ID Number
	- Annabet Hall (1977) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979) (1979)				
2 M 6 D 1	Service and the service and th				
3. Type of Dish			O-1310 forms for		
Operating Exp 4. Payee Inform		tributions to Candida	tes/Political Committee		dinated Party Expenditures
	failing Address & Ph	one	Add L	Remove	Filephine Spall Control
(include city, state		one	b. Coordinat	ted Committee Name	d. Comments
Mount	an Dre	226	c. Level Regi	istered (Specify)	
P.O.	30 x 53	1	☐ Federal	County:	
	here, Ne		State	☐ Municipal	lity: e. Election Sum to Date
hane	here, Ne	- 2014			\$ 124.00
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	j. Amount	k. Required Remarks
	Cle.		9-2-15		Ads.
	U.G.		1	0	7,22.
4 D				3	
4. Payee Inform				ateme (e	2000年,1000年第1月日 1000年 1
(include city, sta	ling Address & Phone		b. Coordinat	ted Committee Name	d. Comments
NAncy	McNary Sunsit		c. Level Regi	istered (Specify)	
, , , , ,	4	c 300 R.1	☐ Federal	County:	
			☐ State	Municipal	lity: e. Election Sum to Date
Lake	Lune, N	C 28746	;		\$ 602.27
f. Account Code	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	li. Amount	k. Required Remarks
	ck	0			
	- CVC		9-20-15		Reimburce Signs
	CK.	ପ	10-15-15	\$320.30	
4. Payee Inform		模和定数图学。	Add	Remove	
	ing Address & Phone		b. Coordinat	ed Committee Name	d. Comments
(include city, sta					8
Daily	Cowieks City N		c Level Regi	istered (Specify)	
	C'.L N	0	Federal	County:	
Znost	City 1		☐ State	Municipal	ity: e. Election Sum to Date
					\$
f. Account Code	T	la a .	Research Description	I and the second	2 28
i. Account Code	g. Form of Payment		i. Date (mm/dd/yyyy)		k. Required Remarks
	Deb:+	14	10-15-15	\$360.00	Ads.
				\$	
5. Total only th	is Page	4. 淡湖湖		LEGISLAND SE	\$1086.27
6. Total of ALI	CRO-1310 Pages	VIII III III III III		2 Harry 19	\$1086.27
	line 13a of Detailed Sun	nmary Page CRO-11	00 if Onerating Expens	es)	1122500
	line 13b of Detailed Sun				\$720.3700
	line 13c of Detailed Sun				
7. Purpose C	odes (List detailed	expenditure code	in (h.) above)		Fig. 5 King Sept.
A* - Media	B* - Printin	ng	C* - Fundraising	D - To A	Another Candidate
E - Salaries	F* - Equip		G - Political Party		olding Public Office Expenses
I - Postage	J - Penalti	es	K* - Office Exper	ises Q* - Do	nation to Legal Expense Fund
O* Other * Codes requir	eo detailed esselessed				
Coues requii	re detailed explanati	on in required r	emarks field (k)		

Disburseme		2			Pg of	
Use this form to re	eport expenditures	from the commit	tee for o	perating exp	enses, contribution	ions to candidate/political
	oordinated party ex Ill Name (and Fund					2. ID Number
	in traine (and A and	т п аррисамс,				2. ID Number
2 Tuna of Dishu	, (Di	1 6	20 701/			
3. Type of Disbut Operating Expen		use separate Ck				
4. Payee Informa		ntributions to Candida	ates/Politic		Remove	rdinated Party Expenditures
	iling Address & Pho	one			ed Committee Name	e d. Comments
(include situ state P	2>			D. Coordina.c	d Commune rame	d. Comments
Jainfield	mts. Vol.	Ivie Dept 28746		c. Level Regis Federal State	stered (Specify) County: Municipal	ality: e. Election Sum to Date
						\$
f. Account Code g	g. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i Amount	k. Required Remarks
No. 2 - Section 17 Section Annual Law Conference	cle.	•	The Secretary of the Secretary		\$ 125.00	
					\$	Donation to Close Acet
4. Payee Informa	ition			Add	Remove	
a. Full Name, Mailin					ed Committee Name	e d. Comments
(include city, state,	, & zip)		3000			
ratica 1491 M Lake h	Marige nemnial	Hwy - 28746		c. Level Regis Federal State	stered (Specify) County: Municipal	ality: e. Election Sum to Date
f. Account Code g	. Form of Payment	h. Purpose Code	i. Date (mm/dd/yyyy)	i. Amount	k. Required Remarks
	ck.			A CONTRACTOR OF THE PARTY OF TH	\$ 13.73	
			7.0	3.75	9	40 Close Aast. Reimbure Con Stemps
4. Payee Informa	tion				3	Remove to
a. Full Name, Mailin		A. A	L	The second secon	Remove ed Committee Name	
(include city, state,				b. Coordinate	d Committee Name	e d. Comments
				c. Level Regis Federal State	stered (Specify) County: Municipal	
		To the second se				\$
f. Account Code g	. Form of Payment	h. Purpose Code	i. Date (r			k. Required Remarks
					\$	
		ki			\$	
5. Total only this	Page					\$ 138.73
6. Total of ALL	CRO-1310 Pages				AME TO SERVICE	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
(This line goes in li (This line goes in li	ine 13a of Detailed Sum ine 13b of Detailed Sum ine 13c of Detailed Sum	nmary Page CRO-11	100 if Cont	trib to Candida	ites/Political Comm)	\$
	des (List detailed			THE RESIDENCE OF THE PARTY OF T		
A* - Media E - Salaries I - Postage O* Other	B* - Printin F* - Equip J - Penaltic	ng ment	C* - Fu G - Pol	undraising litical Party office Expens	Н* - Но	Another Candidate olding Public Office Expenses onation to Legal Expense Fund

Disbursements

Amendment

In-Kind Contributions		g of }_	-	ndment
Use this form to report non-monetary contributions, donations, go			ttee or fund	
Use CRO-1215 if In-Kind Contributions were or will be ref	unded within 7 d	avs.	itee or run	1.
1. Committee Full Name (and Fund if applicable)			2. ID N	ımber
3. Contributor Information	I Add □ R	emove.	经税"海时	推出的一个一个
a. Full Name, Mailing Address & Phone	b. Type of Contr	ributor	c. Comme	nts
(include city, state, & zip)	Individual			
Patricia maringer 1491 menniet Huy Lake hure, Ne 28746	Candidate Party			
1491 Mennial Hwy	PAC		ľ	
Lala hune Ne 28746	Referendum		d. Election	Sum to Date
hade seed,	Other Recei	pt Source		
			\$	
e. Description		f. Date (mm/dd/yy	yy) g. Fai	ir Market Amount
filing fee		7-14-13	5 \$	5.00
Stamps			\$ 0	19.00
			\$	
3. Contributor Information	Add Re	emove	1478495	マ グルト)、 / /
a. Full Name, Mailing Address & Phone	b. Type of Contr	ibutor	c. Comme	nts a
(include city, state, & zip)	Individual			
Janes Man ARY	Candidate			
NA-7 // 01	Party PAC	*		
189 Sunset Che Ra.	Referendum		d Flection	Sum to Date
NAMEY MeiNARY 189 Sunset Cove Rd. Lake Leur, Ne 28746	Other Receip		050	Sum to Date
		*	\$	
e. Description	i ve en Nore	f. Date (mm/dd/yy)	y) g. Fai	r Market Amount
Signs		9-20-15	\$ 2	281.97
Signs Signs		9-20-15	- \$	320.30
			\$	
3. Contributor Information	I Add ⋈ □ Re	moves the second	PARTITION OF THE	HOLD CONTRACT AND
a. Full Name, Mailing Address & Phone	b. Type of Contr	ibutor	c. Commer	its.
(include city, state, & zip)	Individual			
8	Candidate Party			
	PAC			
	Referendum		d. Election	Sum to Date
	Other Receip	t Source	6	
			\$	
e. Description		f. Date (mm/dd/yyy	y) g. Fai	r Market Amount
			\$	And the second section of the section
			\$	
	1 10		\$	
4. Total only this Page	明何年等法律	The Boats	\$	
5. Total of ALL CRO-1510 Pages (This line must be on line 17 of Detailed Summary Page CRO-1100)	and of the parties of		\$ 65	56.27